

**Effective October 1, 2000**

Application or Docket Number.

06478.1457

(Column 1)	(Column 2)
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
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93	94
95	96
97	98
99	100

TOTAL CLAIMS	17	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	17 minus 20 =	*
INDEPENDENT CLAIMS	2 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

(Column 1)	(Column 2)	(Column 3)
1	2	3
4	5	6
7	8	9
10	11	12
13	14	15
16	17	18
19	20	21
22	23	24
25	26	27
28	29	30
31	32	33
34	35	36
37	38	39
40	41	42
43	44	45
46	47	48
49	50	51
52	53	54
55	56	57
58	59	60
61	62	63
64	65	66
67	68	69
70	71	72
73	74	75
76	77	78
79	80	81
82	83	84
85	86	87
88	89	90
91	92	93
94	95	96
97	98	99
100	101	102
103	104	105
106	107	108
109	110	111
112	113	114
115	116	117
118	119	120
121	122	123
124	125	126
127	128	129
130	131	132
133	134	135
136	137	138
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211	212	213
214	215	216
217	218	219
220	221	222
223	224	225
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229	230	231
232	233	234
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238	239	240
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247	248	249
250	251	252
253	254	255
256	257	258
259	260	261
262	263	264
265	266	267
268	269	270
271	272	273
274	275	276
277	278	279
280	281	282
283	284	285
286	287	288
289	290	291
292	293	294
295	296	297
298	299	300
301	302	303
304	305	306
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310	311	312
313	314	315
316	317	318
319	320	321
322	323	324
325	326	327
328	329	330
331	332	333
334	335	336
337	338	339
340	341	342
343	344	345
346	347	348
349	350	351
352	353	354
355	356	357
358	359	360
361	362	363
364	365	366
3		

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
	Total	22	Minus	58	=
Independents	2	Minus	3	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

**SMALL ENTITY TYPE** ☐ **OR** **LARGER THAN SMALL ENTITY**

RATE	FEE		RATE	FEE
BASIC FEE	355.00	OR	BASIC FEE	710.00
X5 9=		OR	X\$18=	
X40=		OR	X60=	
+135=		OR	+270=	
TOTAL		OR	TOTAL	770

SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
<p>1. Name of the applicant:</p> <p>2. Address of the applicant:</p> <p>3. City and State of the applicant:</p> <p>4. Title of the invention:</p> <p>5. Date of filing:</p> <p>6. Name of the inventor:</p> <p>7. Address of the inventor:</p> <p>8. City and State of the inventor:</p> <p>9. Name of the assignor:</p> <p>10. Address of the assignor:</p> <p>11. City and State of the assignor:</p> <p>12. Name of the licensee:</p> <p>13. Address of the licensee:</p> <p>14. City and State of the licensee:</p> <p>15. Name of the assignee:</p> <p>16. Address of the assignee:</p> <p>17. City and State of the assignee:</p> <p>18. Name of the licensee:</p> <p>19. Address of the licensee:</p> <p>20. City and State of the licensee:</p>		<p>1. Name of the applicant:</p> <p>2. Address of the applicant:</p> <p>3. City and State of the applicant:</p> <p>4. Title of the invention:</p> <p>5. Date of filing:</p> <p>6. Name of the inventor:</p> <p>7. Address of the inventor:</p> <p>8. City and State of the inventor:</p> <p>9. Name of the assignor:</p> <p>10. Address of the assignor:</p> <p>11. City and State of the assignor:</p> <p>12. Name of the licensee:</p> <p>13. Address of the licensee:</p> <p>14. City and State of the licensee:</p> <p>15. Name of the assignee:</p> <p>16. Address of the assignee:</p> <p>17. City and State of the assignee:</p> <p>18. Name of the licensee:</p> <p>19. Address of the licensee:</p> <p>20. City and State of the licensee:</p>

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X\$2=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL		OR	TOTAL	
ADD. FEE		OR	ADD. FEE	

RATE	ADDITIONAL FEE
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XS 9=		OR	XS18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADD-T FEE		OR	TOTAL ADD-T FEE	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
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XS9=	OR	XS18=
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DATE OR TOTAL

\*\*\* the "highest Number: Page" only Page First: 2. THE SPACE is always 1

The "Highest Number Paid For" is the highest number paid for the property.